

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.

09/869,094

Confirmation No. : 1011

First Named Inventor Filed

Gervasio MERCURI : September 18, 2001

TC/A.U.

: 1772

Examiner Docket No. : Catherine Simone : 010414.50147US

Customer No.

: 23911

Title

: Meat Product Casing Having a Maximum Extensible

Diameter

REQUEST FOR ORAL HEARING

Mail Stop Appeal Brief- Patents

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Appellants hereby request an oral hearing in connection with the aboveidentified application.

Appellants hereby submit the required filing fee of \$1,000.00 under 37 CFR 1.17 (g).

It would be appreciated if the undersigned were telephoned in the event there are any questions related to this response or the application in general.

If necessary to effect a timely response, this paper should be considered as a petition for an Extension of Time sufficient to effect a timely response, and please charge any such fee or any deficiency in fees or credit any overpayment of fees to Deposit Account No. 05-1323, Docket No. 010414.50147US.

Respectfully submitted,

August 15, 2005

08/17/2005 EFLORES 00000078 09869094

01 FC:1403

1000.00 OP

Vincent J. Sunderdick Registration No. 29,004

CROWELL & MORING LLP Intellectual Property Group P.O. Box 14300 Washington, DC 20044-4300 Telephone No.: (202) 624-2500 Facsimile No.: (202) 628-8844

VJS:ddd #391193

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.

pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT	(\$) 1,000								
Applicant claims small entity status. See 37 CFR 1.27									

to a collection of information	on unless it displays a valid OMB control number
Co	omplete if Known
Application Number	09/869,094
Filing Date	September 18, 2001
First Named Inventor	Gervasio MERCURI
Examiner Name	Catherine Simone
Art Unit	1772
Attorney Docket No.	010414.50147US

TOTAL AMOUNT OF T	VINCIAL (A)	1,000		Attorney Docke	1140. 010	414.3014703	
METHOD OF PAYMENT (check all that ap	oply)					
□ Credit Car	rd Money	Order 🔲	None [Other (please	identify):		
☑ Deposit Account Dep	osit Account Numb	er: 05-	1323 (Docket	No. 010414.50147)	Deposit Account N	lame: 23911
For the above-identified	d deposit accour	nt, the Directo	r is hereby a	authorized to: (cl	neck all that a	pply)	
Charge fee(s) indicated	l below		☐ Charge	fee(s) indicated belo	ow, except for th	e filing fee	
Charge any additional f	ee(s) or underpaym	ents of fee(s)	Credit a	ny overpayments			
under 37 CFR 1.16 and	J 1.17						
WARNING: Information on this							
information and authorization		e public. Credit	caru iniormai	ion should not be	included on this	s form. Provide cre	ait card
FEE CALCULATION							
1. BASIC FILING, SEARC	H, AND EXAMIN	ATION FEES					
	FILING FE	ES	SEARCH FEES		EXAMINATION FEES		Ÿ
	s	mall Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant Reissue	200 300	100 150	300 500	150 250	160 600	80	
Provisional	200	100	0	250	0	300 0	
2. EXCESS CLAIM FEES	200	100	ŭ	Ū	Ū	Ū	
							Small Entity
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 or, fo	r Reissues, each	claim over 20	and more tha	an in the original	patent	50	25
Each independent claim	over 3 or, for Rei	ssues, each in	dependent cl	aim more than in	the original pa	itent 200	100
Multiple dependent claim	s					360	180
Total Claims	Extra claims	Fees(\$)	<u>Fee Pai</u>	<u>d (\$)</u>	<u>Multi</u>	ple Dependence C	<u>laims</u>
-20 or HP		,×	=		I	Fee(S)	Fee Paid (\$)
HP = highest number of total claims	aims paid for, if greater a paid for a greater a claims	eter than 20 Fees(\$)	Fee Pale	4 (e)			
- 3 or HP	Extra Claims	χ <u>ι εσэίδι</u>	= ree Fan	7.741			
HP = highest number of total cla	aims paid for, if gre	-					
3. APPLICATION SIZE I	•						
If the specification and dr	awings exceed 1	00 sheets of p	aper, the app	lication size fee	due is \$250 (\$1	125 for small entit	v) for each
additional 50 sheets or fra	action thereof. Se	e 35 U.S.C. 4	1(a)(1)(G) an	d 37 CFR 1.16(s).		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Total Sheets	Extra Sheets		mber of each	additional 50 or fra	action thereof	Fee (\$)	Fee Paid (\$)
- 100 =		/ 50 =	R	ound up to a whole	number x		z
4. OTHER FEES							
Attack Carried Co. 10. 10. 10.							Fee Paid (\$)
Non-English Specification, \$130	- '	y discount)					4.000
Other Request for Ora	nearing						\$1,000
SUBMITTED BY							
JODINITIED DI	7) -	.1 1	1 / R	gistration No.			
Signature	Mund X	VIIA. VI			20.004	Tolonhone	(202) 624 2500

Signature

| Signature | Signature | Registration No. (Attorney/Agent) 29,004 | Telephone (202) 624-2500 |
| Name (Print/Type) | Vincent J. Sunderdick | Date | August 15, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.